NY STATE CLIENT SEMI-ANNUAL REPORT

Marking Instructions: Please type or use blue or black ink pen.

Completely fill in one circle.

Print legible numbers and block letters, no script.

COMPLETE ALL SECTIONS

before submitting or form will be returned.

Reporting Information Year: 2012 Fill in circle if amendment	RELEWELL IAM 15 ZUIS
ASSA. (NY)) Permanent Business Address: 50	N. CFKA Newspaper Publishers Vin Ave., State: NY ZIP code: 12206 Fax Number: 518-449-5053
Lobbyist(s) Information & Compens Any individual or organization that has lobbied on beha threshold was exceeded by that individual or organization	alf of the client must be reported below, regardless of whether the
A Type of Lobbyist: O Retained En Level of Gov't: State Lobbying O Lo Name: Diana Kannady Address: 50 Win Ava City: Albany Compensation for current period: \$13,50	Phone Number: 518-449-1667 State: NY ZIP code: 12206
B Type of Lobbyist: Retained	mployed O Designated ocal Lobbying O Both M C Graw Phone Number: 518-463-5449 aza, Suita 400 state: NY ZIP code: 12210
	mployed O Designated ocal Lobbying O Both Phone Number:
City: Compensation for current period: \$ Ocontinued on attached pages	State: ZIP code:

D TOTAL COMPENSATION of ALL lobbyists for current period..........(A+B+C+addendum sheets): \$ 36,000.00

IV Other Expenses (Current Semi-Annual	Period Only)		
A Report in the aggregate all expenses less than or equal	to \$75:	\$	00.
B Report in the aggregate all expenses for salaries of non-	lobbying employees	: , \$	OO. ()
C Itemize each expense exceeding \$75:			
PAID TO:	DATE: /	/	O Ad O Social Event
PURPOSE:	AMOUNT: \$.00	O *Addendum attached
O PROCUREMENT O NONPROCUREMENT			
PAID TO:	DATE: /	1	O Ad O Social Event
PURPOSE:	AMOUNT: \$.00	O *Addendum attached
O PROCUREMENT O NONPROCUREMENT			
O Continued on attached pages			
If any expense listed above exceeds \$75 for an in expense, dollar amount attributable to the indivi-	ndividual, you must	attach the ad	dendum page listing the
D Total expenses for current period: \$			nses from attached pages in total)
V Source of Funding Disclosure			
Instructions: In the event only one person or entity is listed event multiple persons or entities have been	ed as the Single Sour	ce for a Contrib	oution(s), use Section A. In the
A Below, list all Contributions received from the received. If more than five Contributions from	e Single Source. Inc	lude the date	and the amount of the Contribution
Addendum for the additional Contributions.	me single source	nave been led	served, use section v(C) of the
Contribution(s) from Single Source #1	^		
Single Source Entity's Name: Capital Na	SNOGORE		¥
Single Source Person's Last Name:	TO THE STATE OF TH	Name:	
Address: Box 15000 Naws	Plaza		
City: Albany	State	: NY	ZIP code: 12212
Phone: 518- 454- 5694		- 1	æ.
Date Contribution Received: 3/2//2	Amount of C	Contribution:	\$ 540 .00
Date Contribution Received: 5/25/12	Amount of C	Contribution:	\$ 540 .00
Date Contribution Received: 8 123 112	Amount of C	Contribution:	\$ 540 .00
Date Contribution Received: 11 / 14 / 12	Amount of C	Contribution:	\$ 540 .00
Date Contribution Received: / /	Amount of C	Contribution:	\$.00
Check here if using section V(C) of the Addendum for addit	ional Contributions:		0
Contribution(s) Single Source #2			
Single Source Entity's Name: Dank (a)	atta		
or Single Source Person's Last Name:		lame:	
Address: 2345 Makon Rd Ex	+		
City: Schanactary	State	: NU	ZIP code: 12301
Phone: 518 - 374 - 4141		' 1	1.5001
Date Contribution Received: / /3/ / /3	Amount of C	Contribution: S	\$ 275 .00
Date Contribution Received: 4 / 30 / 12		Contribution: :	a 15
Date Contribution Received: 7/3//		Contribution: S	2 /->
Date Contribution Received: 10/31/12		Contribution: 5	$\alpha 10$
Date Contribution Received: / /		Contribution: S	α / β
Check here if using section V(C) of the Addendum for addit			
Check here if there are Contribution(s) from Single Source(s)		ed above. Use	e Section V(A) of the
Addendum to list all such Contributions:			

V Source of Funding Disclosure		
A Below, list all Contributions received from the Six received.	ngle Source. Include the date and	the amount of the Contribution
Contributions from Single Source #3		
Single Source Entity's Name: Buttalo	26	
or Single Source Person's Last Name:	First Name:	
Address: Ona Naws Plaza, P.O.	BOX 100	
City: Buffolo	State: NY	ZIP code: 14203
Phone: 716-849-4444		17203
Date Contribution Received: 3 / 12 / 12	Amount of Contribution: \$	358.00
Date Contribution Received: 5 / 24 / 12	Amount of Contribution: \$	358.00
Date Contribution Received: 8 / 23/10	Amount of Contribution: \$	358 .00
Date Contribution Received: 11 / 21 / 12	Amount of Contribution: \$	358.00
Date Contribution Received: / //	Amount of Contribution: \$.00
Check here if using section V(C) of the Addendum for addition	al Contributions:	0
Contributions from Single Source # 4		2
Single Source Entity's Name: Naw Soay		
or Single Source Person's Last Name:	First Name:	
Address: 235 Pinelaun Ave	riisi Name.	
city: Malville,	State: 🏳 🇸	ZIP code: 11747
Phone: 631 - 843 - 2700		2 5565. / (1 / /
Date Contribution Received: 4/6/12	Amount of Contribution: \$	1080.00
Date Contribution Received: 5/25/12	Amount of Contribution: \$	540 .00
Date Contribution Received: // / 19 / /2	Amount of Contribution: \$	1080.00
Date Contribution Received: / /	Amount of Contribution: \$.00
Date Contribution Received: / /	Amount of Contribution: \$.00
Check here if using section V(C) of the Addendum for addition	al Contributions:	0
Contributions from Single Source #_5		3
Single Source Entity's Name: The Naw J	Jork Times	
Single Source Person's Last Name:	First Name:	
Address: 620 Eighth Ava.		
City: Naw York	State: NY	ZIP code: 10018
Phone: 213 556-1234	. 1	
Date Contribution Received: 8/15/12	Amount of Contribution: \$	1101.00
Date Contribution Received: 9/7/12	Amount of Contribution: \$	165, .00
Date Contribution Received: / /	Amount of Contribution: \$.00
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Date Contribution Received: / /	Amount of Contribution: \$.00
Check here if using section V(C) of the Addendum for additional	Il Contributions:	\cap

V Source of Funding Disclosure	ne desetat	
B Single Source information for a Contribution(s) from multiple, Related, or Affiliated Entities.		
Single Source #		
Related or Affiliated Entity or Person: (2011)		
Entity's or Person's Full Name: Binghamton Press & Sun Bullativ	7	
Related or Affiliated Entity or Person: Gannath Co(p. Entity's or Person's Full Name: Bringhamton Prass of Sun Bullative Entity's or Person's Address: 33 Lawis Road Binghamton, NY 13	340	5
Entity's or Person's Phone: 607-798 1234		
Dates and Amounts of Contributions from Entity or Person:) / /	20
	. ,	.00
	. ,	.00
Date Contribution Received: 8 / 23 / 12 Amount of Contribution: \$	/ /	.00
	14.	.00
Related or Affiliated Entity or Person: Entity's or Person's Full Name: Entity's or Person's Address: 123 wast State St., Ithaca, L		
Entity's or Person's Address: 123 Wast State St. Ithacail	101	Va-
Entity's or Person's Address: 123 wast State St., Ltuaca, MEntity's or Person's Phone: 607-272-2321	7'	7000
Dates and Amounts of Contributions from Entity or Person:		
	04.	.00
Date Contribution Received: $5/25//2$ Amount of Contribution: \$ $//2$	04.	.00
Date Contribution Received: $8/23/12$ Amount of Contribution: \$ 10	4.	.00
Date Contribution Received: 11/2(/12 Amount of Contribution: \$ 10	4.	.00
Single Source #		
Related or Affiliated Entity or Person: Ganna H Corp,		
Entity's or Person's Full Name: Elmica Star Gazatta	1 -	
Entity's or Person's Full Name: Elmi's Star Gazatta Entity's or Person's Address: 201 Baldwin St., Elmi'a, NY 14	490:	2
Entity's or Person's Phone: 40 (- 734-515)		
Dates and Amounts of Contributions from Entity or Person: Date Contribution Received: 3/12/12 Amount of Contribution: \$ /(ala	.00
Date Contribution Received: $5/12/12$ Amount of Contribution: \$ $1/2$, '	.00
Date Contribution Received: $\frac{9}{23}$ / $\frac{23}{12}$ Amount of Contribution: \$ 1/2	' 1	.00
Date Contribution Received: $11/21/12$ Amount of Contribution: \$ 16	4	.00
and the state of t	٠, ٢	00
2011(21)		
Entity's or Person's Full Name: Pough Keapsia Journal Entity's or Person's Address: 85 Civic Contar Plaza, Pough Kaapsa, &)V)-	7/01
Entity's or Person's Phone: 845-454-2000		(601
Dates and Amounts of Contributions from Entity or Person:		
Date Contribution Received: $5/25/12$ Amount of Contribution: \$ 46	, / .	00
Date Contribution Received: $8/23/12$ Amount of Contribution: \$ 23). C	00
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V Source of Funding Disclosure					
B Single Source information for a Contribu	tion(s) fro	m multip	ole, Related, or Affiliated Entition	es.	1
Single Source #			^		
Related or Affiliated Entity or Person:	no H		0/00		
Related or Affiliated Entity or Person: Entity's or Person's Full Name:	Star		comocrat d Cl	hranicle	15
Entity's or Person's Address: 55 E	Kcho	SINGC	comocrat d Cl	astar, NYK	1614
	232-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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Related or Affiliated Entity or Person: Game	- n.	Cory	0 ,		
Entity's or Person's Full Name:	21 1	Doi)5		,
	nnath	Dr.	, White Plain	15, 24/06	04
Entity's or Person's Phone: $914-69$		300		<i>2.</i> "	
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Entity's or Person's Address:					
Entity's or Person's Phone:					
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Date Contribution Received:	./	1	Amount of Contribution:	\$.00
Date Contribution Received:	1	1	Amount of Contribution:	\$.00
Related or Affiliated Entity or Person:					
Entity's or Person's Full Name:					
Entity's or Person's Address:					
Entity's or Person's Phone:					
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A 20 nuce of Envertig Disclosure	The state of the s
B Single Source information for a Contribution(s) for	om multiple, Related, or Affiliated Entities.
Single Source # 2 7 B	
Related or Affiliated Entity or Person: La En	tarprisas,
Related or Affiliated Entity or Person: Laa Entity's or Person's Full Name: Glans F	all's Post Star
Entity's or Person's Address: Law Conca d	Cooper Streets, Glens Falls, My 12801
Entity's or Person's Phone: 518-792	-3/3/
Dates and Amounts of Contributions from Entity of	1
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Date Contribution Received: 4	1/2 Amount of Contribution: \$ 37.9 .00
Date Contribution Received: 8 / 3 /	/12 Amount of Contribution: \$ $/90.00$
Date Contribution Received: 12 17	//2 Amount of Contribution: \$ $/90.00$
	talplisas
Entity's or Person's Full Name:	Citizen
Entity's or Person's Address: 25 Dill St	- Lauburn, NY 13021
Entity's or Person's Phone: $315 - 253 - 315$ Dates and Amounts of Contributions from Entity of	
	\(\frac{1}{2}\) Amount of Contribution: \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Date Contribution Received: \tilde{q} / \bar{q}	//2 Amount of Contribution: \$ $7/.00$
Date Contribution Received: 11 / 2	8/1/2 Amount of Contribution: \$ 142.00
Date Contribution Received: /	/ Amount of Contribution: \$.00
Single Source $\#$	
Related or Affiliated Entity or Person:	ones
Entity's or Person's Full Name:	Herald Recold
	parry St, m. Seletown, Ny10942
Entity's or Person's Phone: $845 - 341$.	- 1100
Dates and Amounts of Contributions from Entity of	
	-1/2 Amount of Contribution: \$ 463.00
	$\frac{1}{2}$ Amount of Contribution: \$ $\frac{4}{6}$ 3 .00
	1/12 Amount of Contribution: \$ 463.00
Date Contribution Received: /2/2	3/12 Amount of Contribution: \$ 463.00
	onas
Entity's or Person's Full Name:	tract Journal
Entity's or Person's Address: 1121 Avanue	of the Americas, New York, My 10034
Entity's or Person's Phone: 212 - 416 -	2000
Dates and Amounts of Contributions from Entity or	
9	_/ /Z Amount of Contribution: \$ 550 .00
	//2 Amount of Contribution: \$ 350 .00
	//2 Amount of Contribution: \$ // \(\) .00
Date Contribution Received: /	/ Amount of Contribution: \$.00

V Source of Funding Disclosure		
B Single Source information for a Contribution(s) from multiple, Related, or Affiliated Entities.		
Single Source # 9		
Related or Affiliated Entity or Person: Advance Poblications		
Entity's or Person's Full Name: Statem IS Day Advan	100	
Entity's or Person's Address: 950 Finger books RD, Staton ISI	and My	10305
Entity's or Person's Phone: 718-981-1456	, ,	
Dates and Amounts of Contributions from Entity or Person:	361	.00
Date Contribution Received: 3/12/12 Amount of Contribution: \$ Date Contribution Received: 4/4/12 Amount of Contribution: \$	200	.00
	761	.00
Date Contribution Received: 8/31/12 Amount of Contribution: \$	361	
Date Contribution Received: 11/26/12 Amount of Contribution: \$	361	.00
Related or Affiliated Entity or Person: Entity's or Person's Full Name: Related or Affiliated Entity or Person: Advance Poblication	0	
09/2000	A STATE OF THE PARTY OF THE PAR	0.5
Entity's or Person's Address: Clinton Square, Syvacuse, N Entity's or Person's Phone: 315-470-0011	14 1320	12
Dates and Amounts of Contributions from Entity or Person:		
Date Contribution Received: $4/6/2$ Amount of Contribution: \$	540	.00
Date Contribution Received: ℓ / ℓ / /2 Amount of Contribution: \$	540	.00
Date Contribution Received: $8/31/2$ Amount of Contribution: \$	540	.00
Date Contribution Received: 11 / 30 / 12 Amount of Contribution: \$	540	.00
Single Source # 10	. Hol	(dings)
Related or Affiliated Entity or Person: CNHT Inc. (Communita	, Nowspa,	per
Entity's or Person's Full Name: Lockbox + Union Sun d	Lour	10)
Entity's or Person's Address: 170 East Ave, Lockport, 1	JY 140	095
Entity's or Person's Phone: 716 - 439 - 9222	<i>f.</i>	
Dates and Amounts of Contributions from Entity or Person:		
Date Contribution Received: 3 //2/12 Amount of Contribution: \$	16	.00
Date Contribution Received: 6/26/12 Amount of Contribution: \$	76	.00
Date Contribution Received: 8 /30 / 12 Amount of Contribution: \$	76	.00
Date Contribution Received: // /30 / 12 Amount of Contribution: \$	76	.00
Related or Affiliated Entity or Person:		
Entity's or Person's Full Name: Making Journal- Kagista	W	
Entity's or Person's Full Name: Madina Journal Ragista Entity's or Person's Address: 170 East tra, Lockport, No	1 1409.	5
Entity's or Person's Phone: $585 - 798 - 1400$	1	
Dates and Amounts of Contributions from Entity or Person:	\sim 1	
Date Contribution Received: 3/12/12 Amount of Contribution: \$	21	.00
Date Contribution Received: $(6/4/2)$ Amount of Contribution: \$	21	.00
Date Contribution Received: $8/30/(2)$ Amount of Contribution: \$	21	.00
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V Source of Funding Disclosure
B Single Source information for a Contribution (s) from multiple, Related, or Affiliated Entities.
Single Source #_10_
Related or Affiliated Entity or Person:
Entity's or Person's Full Name: Niagata Falls - Niagata Gazatte
Entity's or Person's Full Name: Niagara Falls - Niagara Gazatte Entity's or Person's Address: 310 Niagara St., Niagara Falls, NY 14302
Entity's or Person's Phone: $716-282-2311$
Dates and Amounts of Contributions from Entity or Person:
Date Contribution Received: 3 / 12/12 Amount of Contribution: \$ /32.00
Date Contribution Received: 5/24/12 Amount of Contribution: \$ 32.00
Date Contribution Received: $\frac{9}{30}/12$ Amount of Contribution: \$ $\frac{132}{30}$.00
Date Contribution Received: $11/30/12$ Amount of Contribution: \$ 132.00
Related or Affiliated Entity or Person: CNHT Related or Affiliated Entity or Person: CNHT Related or Affiliated Entity or Person: CNHT CNH
Entity's or Person's Full Name: Plats burgh Plass - Republican Entity's or Person's Address: 170 Margaret St, Platsburgh, Ny 12901
Entity's or Person's Address: 170 Margarct St, Plattsburgh, NY 12901 Entity's or Person's Phone: 518-561-2300
Dates and Amounts of Contributions from Entity or Person:
Date Contribution Received: $3/12/12$ Amount of Contribution: \$ 8/3 .00
Date Contribution Received: $7/12/12$ Amount of Contribution: \$ 813.00
Date Contribution Received: $9/7/7$ Amount of Contribution: \$ 813 .00
Date Contribution Received: $12/10/12$ Amount of Contribution: \$ 813.00
Single Source # 10
Related or Affiliated Entity or Person: CNHI
Entity's or Person's Full Name: Tonawand Naws
Entity's or Person's Address: 435 RIVAL RO, TONDWANCH, NY 14120
Entity's or Person's Phone: $716 - 693 - 1000$
Dates and Amounts of Contributions from Entity or Person:
Date Contribution Received: $\frac{3}{2}$ / $\frac{2}{12}$ Amount of Contribution: \$ $\frac{5}{2}$.00
Date Contribution Received: 6 / 15/12 Amount of Contribution: \$ 52 .00
Date Contribution Received: $9/7/12$ Amount of Contribution: \$ 52.00
Date Contribution Received: 12/7/12 Amount of Contribution: \$ 52.00
Related or Affiliated Entity or Person:
Entity's or Person's Full Name:
Entity's or Person's Address:
Entity's or Person's Phone:
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V Source of Funding Disclosure	
B Single Source information for a Contribution	(s) from multiple, Related, or Affiliated Entities.
Single Source #	
Related or Affiliated Entity or Person: Og Jan	1 Nowspapers
Entity's or Person's Full Name: Dank	ive Observar
	econd St., Dunkirk, NY 14048
	46-3000'
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Date Contribution Received: $\langle \zeta \rangle$	27/12 Amount of Contribution: \$ (a1 .00
Date Contribution Received: (D)	31 / 12 Amount of Contribution: \$ 6/ .00
Related or Affiliated Entity or Person: Ogdow	Now Spapers
Entity's or Person's Full Name:	mastown Post Journal
Entity's or Person's Address: 15 Wast	Second St., Jamestown, Ny 14702
Entity's or Person's Phone: 716 - 48	
Dates and Amounts of Contributions from Entit	5.57
Date Contribution Received: 2 /	28/12 Amount of Contribution: \$ 1/2.00
	$\frac{4}{12}$ Amount of Contribution: \$ $\frac{1}{2}$.00
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Polated or Affiliated Entity or Demans	x 2 2 2 2 2 2 2 CC
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	1+on St., Gloversville, Ny 12078
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Date Contribution Received: 3 /	2 / 1Z Amount of Contribution: \$ 6/ .00
Date Contribution Received: 5/	24/12 Amount of Contribution: \$ 6/ .00
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Related or Affiliated Entity or Person:	1 Nows Papars
Entity's or Person's Full Name:	ic Laka
Entity's or Person's Address: 54 BVOR	Shay, Savanac Lake, NY 12983
Entity's or Person's Phone: 518-891-	2600
Dates and Amounts of Contributions from Entity	y or Person:

2/28/12 Amount of Contribution: \$

5/24/12 Amount of Contribution: \$

115/12 Amount of Contribution: \$

19 / 12 Amount of Contribution: \$

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Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

Source of Funding Disclosure Single Source information for a Contribution(s) from multiple, Related, or Affiliated Entities. Single Source # 12 Related or Affiliated Entity or Person: Entity's or Person's Full Name: Entity's or Person's Address: 73 Entity's or Person's Phone: Dates and Amounts of Contributions from Entity or Person: 23/12 Amount of Contribution: \$.00 Date Contribution Received: 24/12 Amount of Contribution: \$ Date Contribution Received: .00 2//12 Amount of Contribution: \$ Date Contribution Received: .00 Amount of Contribution: \$ Date Contribution Received: .00 Related or Affiliated Entity or Person: Entity's or Person's Full Name: Entity's or Person's Address: | | | Entity's or Person's Phone: Dates and Amounts of Contributions from Entity or Person: 1 23/12 Amount of Contribution: \$ Date Contribution Received: .00 / Ly / (> Amount of Contribution: \$.00 Date Contribution Received: /12/12 Amount of Contribution: \$ Date Contribution Received: .00 Date Contribution Received: 130 / 12 Amount of Contribution: \$.00 Single Source # 12 Related or Affiliated Entity or Person: Entity's or Person's Full Name: Entity's or Person's Address: 34 Entity's or Person's Phone: Dates and Amounts of Contributions from Entity or Person: 31/12 Amount of Contribution: \$ Date Contribution Received: .00 123/12 Amount of Contribution: \$ Date Contribution Received: .00 126 / 12 Amount of Contribution: \$ Date Contribution Received: .00 Date Contribution Received: 12 Amount of Contribution: \$.00 70 Related or Affiliated Entity or Person: Entity's or Person's Full Name: Evenina Entity's or Person's Address: > Entity's or Person's Phone: Dates and Amounts of Contributions from Entity or Person: Date Contribution Received: 6 / 12 Amount of Contribution: \$.00 126/12 Amount of Contribution: \$ Date Contribution Received: .00 //ZAmount of Contribution: \$ Date Contribution Received: .00 Date Contribution Received: Amount of Contribution: \$.00

V Source of Funding Disclosure				100
B Single Source information for a Contribut	ion(s) fro	m multip	ole, Related, or Affiliated Entities.	
Single Source # 12				
Related or Affiliated Entity or Person:	hos	50	Madia	
Entity's or Person's Full Name:	Fa	ILS	Evaning Timas	
Entity's or Person's Address: 111	Coar	St	- Madia Evaning Timas -, Hackimar, Ny 1335	50
Entity's or Person's Phone: 315-8	66-	-22	20	
Dates and Amounts of Contributions from E	-318	30 03 10 E3 10 10 C		
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Entity's or Person's Full Name:				
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The state of the s	La.	200	Ma Dis	
Entity's or Person's Full Name:	- NO	MA	Modia Borvar-Dispatch Plaza, Utica, Ny 135	
Entity's or Person's Address: 22/0(1)	CL D	OD:	Plaza, Utica, NY 135	01
Entity's or Person's Phone: 3,5-7	92-	40	00)	0 1
Dates and Amounts of Contributions from E				
Date Contribution Received: 3	12	1/2	Amount of Contribution: \$ 246	.00
Date Contribution Received: 5	124	112	Amount of Contribution: \$ 246	.00
Date Contribution Received:	130	112	Amount of Contribution: \$ 246	.00
Date Contribution Received: $\ell \ell$	128	112	Amount of Contribution: \$ 24(.00
Related or Affiliated Entity or Person:	loo	JSa	Masia	
Entity's or Person's Full Name: Walls	Vil	10	Daily Raportar	
Entity's or Person's Address: 159 1	nain	St	1. hlsialla NY 1489	+
Entity's or Person's Phone: 585-59	3-4	538	a commentary of the	<u>J</u>
Dates and Amounts of Contributions from E	ntity or F	Person:		
Date Contribution Received: 4	16	/	Amount of Contribution: \$ 35	.00
Date Contribution Received:	124	/	Amount of Contribution: \$ 35	.00
Date Contribution Received: $$	121	1	Amount of Contribution: \$ 35	.00
Date Contribution Received:	/	1	Amount of Contribution: \$.00

V Source of Funding Disclosure	
B Single Source information for a Contribution(s) from multiple, Related, or Affiliated Entities.	
Single Source # 13	
Related or Affiliated Entity or Person: Johnson, Nawspaper Corp.	
Entity's or Person's Full Name: (atskill Daily Mail	
Entity's or Person's Address: 414 Main St., Catskill, NY 12414	_
Entity's or Person's Phone: $518 - 943 - 2100$	
Dates and Amounts of Contributions from Entity or Person:	0.0
Date Contribution Received: 3 /12 /12 Amount of Contribution: \$.00
Date Contribution Received: 6/4/12 Amount of Contribution: \$.00
Date Contribution Received: $\frac{9}{30}/12$ Amount of Contribution: \$.00
Date Contribution Received: // /2/ //2 Amount of Contribution: \$.00
Related or Affiliated Entity or Person: Entity's or Person's Full Name:	
Paralle Day) (
Entity's or Person's Address: 2 Appollo Diriva, Batavia, My 1400 Entity's or Person's Phone: 585-343-8000	7
Dates and Amounts of Contributions from Entity or Person:	
Date Contribution Received: 3/12/12 Amount of Contribution: \$ 77	.00
Date Contribution Received: $4/30/12$ Amount of Contribution: \$ 77	.00
Date Contribution Received: $8/30/12$ Amount of Contribution: \$ 77	.00
Date Contribution Received: $11/28/17$ Amount of Contribution: \$ 77	.00
Single Source # 13	
Related or Affiliated Entity or Person: Johnson Dows Popar Corp.	
Entity's or Person's Full Name: Hudson Begistar - Star	
Entity's or Person's Address: P.O. Box 635, Hudson, MY 1253	4
Entity's or Person's Phone: 518-828-1616	•
Dates and Amounts of Contributions from Entity or Person: Date Contribution Received: 3 / 12 / 12 Amount of Contribution: \$ 33	00
	.00
Date Contribution Received: 6/4/12 Amount of Contribution: \$ 33	.00
Date Contribution Received: 8/30/12 Amount of Contribution: \$ 33	.00
Date Contribution Received: 11/28/12 Amount of Contribution: \$ 33	.00
Related or Affiliated Entity or Person: Johnson Wass Papar Cop.	
Entity's or Person's Full Name: Massana Advance - Nows T Entity's or Person's Address: 1 Hayron Josta Cappyrous Massana Ally	131
Entitude or Demonia Phone: 31-	13662
Entity's or Person's Phone: $315 - 769 - 2451$ Dates and Amounts of Contributions from Entity or Person:	
Date Contribution Received: $3/12412$ Amount of Contribution: \$.00
Date Contribution Received: $6/15/12$ Amount of Contribution: \$ 49	.00
Date Contribution Received: $9/7/12$ Amount of Contribution: \$ 49	.00
Date Contribution Received: 11 116 112 Amount of Contribution: \$ 49	.00

A Sonice of Finding Disclosure		
B Single Source information for a Contribution(s) from multiple, Related, or Affiliated Entities.		
Single Source # 13		
Related or Affiliated Entity or Person: Johnson Nawspaper Corp.		
Entity's or Person's Full Name: Malana 101916280		
Entity's or Person's Address: 469 E. Main St., Malona, NC	1 /29	53
Entity's or Person's Phone: $518 - 483 - 4700$)	
Dates and Amounts of Contributions from Entity or Person: Date Contribution Received: 3/12/12 Amount of Contribution: \$	31	.00
Date Contribution Received: (e/H/12 Amount of Contribution: \$.31	.00
Date Contribution Received: $g/30/12$ Amount of Contribution: \$	3/	.00
Date Contribution Received: 12/10/12 Amount of Contribution: \$	31	.00
Related or Affiliated Entity or Person: John Son Wowspaper Corp	0,	
Entity's or Person's Full Name: Ogdens borg Joseph		
Entity's or Person's Address: 308 Isaholta St., Og Dans burg,	, NY13	669
Entity's or Person's Phone: 315 - 393 - 1000	<u>j</u>	
Dates and Amounts of Contributions from Entity or Person: Date Contribution Received: 3 /12 / 12 Amount of Contribution: \$	29	00
211	30	.00
	30	.00
Date Contribution Received: $9/7/2$ Amount of Contribution: \$ Date Contribution Received: $11/16/12$ Amount of Contribution: \$	29	.00
Single Source #_13	<u> </u>	.00
Related or Affiliated Entity or Person: Johnson Wards Papar Covi	0	
Entity's or Person's Full Name:	<i>></i> 3	
Entity's or Person's Address: 260 Washington St. Watartown	1001	3601
Entity's or Person's Phone: 315 - 782 - 1000	/, / / .	-401
Dates and Amounts of Contributions from Entity or Person:		
Date Contribution Received: $3/12/12$ Amount of Contribution: \$	172	00
Date Contribution Received: $5/24/12$ Amount of Contribution: \$	172	00
Date Contribution Received: 812311 Amount of Contribution: \$	172	00
Date Contribution Received: $\mathcal{H}/\mathcal{G}/\mathcal{D}$ Amount of Contribution: \$	172	.00
Related or Affiliated Entity or Person: Johnson Was Papars Ca	OP.	
Entity's or Person's Full Name: Johnson, Wawadapars	, ,-2	
Entity's or Person's Address: 260 Washington St., Water form,	141	3601
Entity's or Person's Phone: 315-782-1000	1	,
Dates and Amounts of Contributions from Entity or Person:	110	
Date Contribution Received: $\frac{6}{15}$ / $\frac{15}{12}$ Amount of Contribution: \$	49	.00
Date Contribution Received: $9/7/2$ Amount of Contribution: \$	49	.00
Date Contribution Received: $11/19/12$ Amount of Contribution: \$	8,8	.00
Date Contribution Received: $8/28/2$ Amount of Contribution: \$	88	.00

V Source of Funding Disclosure				A A	
B Single Source information for a Contribu	tion(s) from multip	le, Related, or Affiliated Entities.			
Single Source #	1				
Related or Affiliated Entity or Person:					
Entity's or Person's Full Name:	aston	Daily Free	man		
Entity's or Person's Address: 79 Horlay Ave, Kingston, Ny 12401					
Entity's or Person's Phone: 845-	31-50			1	
Dates and Amounts of Contributions from I	20.000 Feb. (100)	-	100		
Date Contribution Received: 3	1121	Amount of Contribution: \$	123	.00	
Date Contribution Received: ζ	1151	Amount of Contribution: \$	123	.00	
Date Contribution Received: /	2/7/	Amount of Contribution: \$	123	.00	
Date Contribution Received:	1 1	Amount of Contribution: \$.00	
Related or Affiliated Entity or Person:	Mal 150	gistax Co. 1/1			
Entity's or Person's Full Name: Ona	id of Do	114 DISPATE	2	,	
Entity's or Person's Address: 130	Svoal St	, l Oneila, My	13421		
	363 - 51	00			
Dates and Amounts of Contributions from I Date Contribution Received:	, I a	Amount of Contribution: \$	91	.00	
Date Contribution Received: 4		Amount of Contribution: \$	91	.00	
		Amount of Contribution: \$	41	.00	
Date Contribution Received: //		Amount of Contribution: \$	41	.00	
Single Source # 14	TOT.				
Related or Affiliated Entity or Person:	1151	Ragistar			
Entity's or Person's Full Name:	(2) togic				
Entity's or Person's Address:	a Ave	, Savatosa Spring	165 K) 4 15	2866	
Entity's or Person's Phone: 518-55	16-42(12) 2000 1020 Abres!	9110112	000	
Dates and Amounts of Contributions from I	Entity or Person:				
Date Contribution Received: $$	1121	Amount of Contribution: \$	58	.00	
Date Contribution Received: (1151	Amount of Contribution: \$	58	.00	
Date Contribution Received: /८	>// /	Amount of Contribution: \$	16	.00	
Date Contribution Received:	1261	Amount of Contribution: \$	58	.00	
Related or Affiliated Entity or Person:	Mal K	agistar			
Entity's or Person's Full Name: The	Reco	B. Troy			
Entity's or Person's Address: 501 Ry	on Dwar		2180		
Entity's or Person's Phone: $518 - 2$	70- 120	3. 1)			
Dates and Amounts of Contributions from E	Programmer of the Programmer o		0-		
Date Contribution Received: 3		Amount of Contribution: \$	45	.00	
	1000000	Amount of Contribution: \$	95	.00	
Date Contribution Received: (2	-128112	Amount of Contribution: \$	45	.00	
Date Contribution Received:	1 . 1	Amount of Contribution: \$.00	

Independent Contractors and Unamployment INSURANCE O Continued on attached pages	Person, State Agency, Municipality or Legislative Body lobbied: Naw York State Dapartment of Labor O Continued on attached pages		
Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied: O Continued on attached pages	Title and Identifying Numbers of procurement contracts/documents lobbied: Continued on attached pages		
IX Number or Subject Matter of Executive Order of Governor/Municipality lobbied: O Continued on attached pages	X Subject Matter of and Tribes involved in tribal-state compacts, etc lobbied: O Continued on attached pages		
This Declaration must be signed by the Chief Administrative Officer. (If the Chief Administrative Officer, for any reason, does not sign, he/she must duly designate another person to sign this Declaration.) (See instructions.) I declare under penalty of perjury that the information contained in this report is true, correct, and complete to the best of my knowledge and belief. X SIGNATURE: DATE: DATE: PRINT NAME: LAST PRINT NAME: LAST			
TITLE: Prosident Mark One: Chief Administrative Officer O E The following MUST be attached to this report You must attach a \$50 dollar filing fee to each semi-annu If applicable, a designation letter if you have marked des	al report. (No fee is required for amendments to the original)		

PLEASE NOTE You may be assessed up to \$25 for each day this report is late.